

## PUBLIC HEALTH ACCREDITATION: THE NATIONAL PERSPECTIVE

LOS ANGELES DEPARTMENT OF PUBLIC HEALTH
ANNUAL QUALITY IMPROVEMENT SUMMIT
JANUARY 29, 2014
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PUBLIC HEALTH ACCREDITATION BOARD
PRESIDENT/CEO



- Describe the current status of the national public health accreditation program
- Discuss the relationship between accreditation and quality improvement
- Identify areas in the accreditation process where building trust with the community is significant





# A Few Facts About Accreditation of Health Departments

# What is Public Health Accreditation?



- The measurement of health department performance against a set of nationally recognized, practicefocused and evidenced-based standards.
- The issuance of recognition of achievement of accreditation within a specified time frame by a nationally recognized entity.
- The continual development, revision, and distribution of public health standards.



# Public Health Accreditation Board (PHAB)



The goal of the voluntary national accreditation program is to improve and protect the health of the public by advancing the quality and performance of state ,local, tribal and territorial public health departments.



and Partners

Public Health

Field

responsiveness to

community priorities

#### **Proximate** Ultimate **Strategies** Outputs Inputs Intermediate Outcomes Outcomes Outcomes Organizational Market program Accreditation Strong, credible and Strenathened Improved identification structure Implement the 7 program: sustainable public health and use of evidence- Board. steps of marketed. accreditation program agencies and based practices and committees and accreditation implemented. in place systems policies evaluated, and work groups Train agencies and - Staffing and site visitors improved Increased consistency in e-PHAB expertise Develop e-PHAB Standards adopted as Improved practice Principles for Evaluate program developed and performance measures conditions in and improve quality data captured standards. Increased use of proven which people measures, and Promote research National Increased support for QI methods and tools can be healthy assessment consensus standards for process accreditation resulting in Promote national public health Site visitors improvements in practice accreditation Improved agencies Increased use of Encourage agencies community Standards drive public to meet national benchmarks for Funders health indicators health transformation standards and seek Partners at evaluating Communication / reduced health accreditation national, state. performance efforts delivered disparities Support agencies Increased inter-agency regional, and Technical through TA before. and inter-sectoral local levels assistance. Improved during, and after Funding collaboration trainings, and communication about process Incentives QI tools Increased Conduct and public health Technical Increased visibility and provided capacity for disseminate Assistance credibility of public health Research optimal research Researchers conducted and agencies investment in and research Enhanced internal and disseminated public health networks Participate in training external collaboration Increased science base and TA for public health practice Assess readiness Interest, buy-in Increased public Agencies are Increased Submit application and accredited organizational recognition of and documentation commitment to Report received Host site visit accountability public health role Public health agencies seek and acted on Review and share and value accreditation more effectively and QL efforts are in. findings Increased knowledge Appropriate efficiently use resources place Develop and Legend stability. of organizational Agencies are implement resources, and strengths and Strengthened Accrediting mentored improvement plan readiness to Agency weaknesses Plans for organizational capacity Implement QI apply Individual Public reaccreditation and workforce Mentor other Previous quality Health Agencies underway Increased awareness agencies improvement Stakeholders of importance of QI Improved

and a supportive

culture

Participate in

process

reaccreditation

and assessment

experience

## Accredited Health Departments in 2013

- Central Michigan Public Health District (MI)
- Chicago Department of Public Health (IL)
- Comanche County Health Department (Lawton, OK)
- El Paso Health Department (CO)
- Franklin County Health Department (Frankfort, KY)
- Kansas City Health Department (MO)
- Livingston County Department of Health (Mt. Morris, NY)
- Northern Kentucky Independent District Health Department (Edgewood, KY)
- Oklahoma City-County Health Department (Oklahoma City, OK)
- Oklahoma State Department of Health (Oklahoma City, OK)
- Polk County Health Department (Balsam Lake, WI)
- Spokane Regional Health District (Spokane, WA)
- Summit County Combined General Health District (Stow, OH)
- The Public Health Authority of Cabarrus County, Inc. d/b/a Cabarrus Health Alliance (Kannapolis, NC)
- Three Rivers District Health Department (Owenton, KY)
- Tulsa Health Department (OK)
- Washington State Department of Health (Olympia, WA)
- West Allis Health Department (West Allis, WI)
- Wood County Health Department (Wisconsin Rapids, WI)



#### January 21, 2014

### 263 Health Departments in

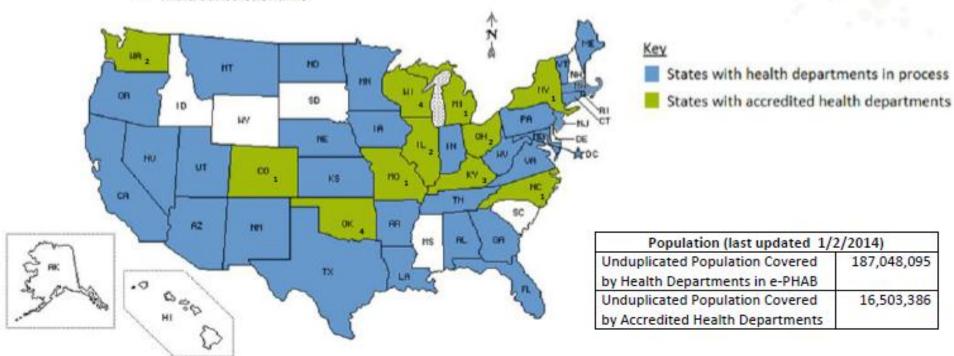
**6**-PHAB

Public Health Accreditation Board (PHAB)
Distribution of Health Departments:

Local: 167
 State: 24
 Tribal: 2

Centralized States Integrated System<sup>i</sup>: 67

Multi-Jurisdictional: 3



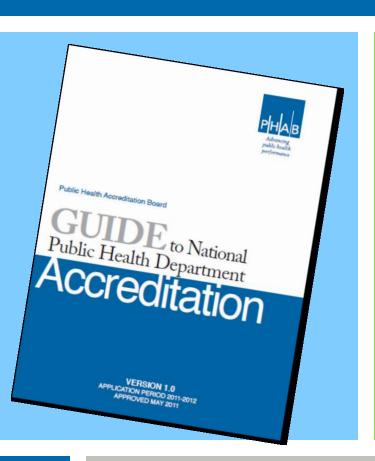
Single accreditation for multiple health departments



- Transparency and Accountability
- Most other governmental and health related services are accredited: hospitals, schools, child care centers, police departments, fire departments, etc.
- Provides a priority setting framework
- Commitment to improving their services
- Increased public engagement and support
- Increased staff morale
- Risk Management
- Potential for increased funding in the future; already using their accreditation certificate in grant proposals



# The PHAB Accreditation Process



## Seven Steps

## 1. Pre-application

Applicant prepares and assesses readiness, informs PHAB of its intent to apply (SOI)

## 2. Application

Applicant submits application and pre-requisites and receives training

# 3. Documentation Selection and Submission

Applicant gathers and submits documentation

### 4. Site Visit

Documentation review, site visit and site visit report

## Accreditation Decisions

PHAB Accreditation Committee determines accreditation status:

Accredited (5 years)

or Not Accredited

## 6. Reports

Annual progress reports

#### 7. Reaccreditation



## **Health Department Role**

- Appoint an Accreditation Coordinator
- Establish an Accreditation Team
- Select the best documentation for each of PHAB's measures and requirements for documentation
- Outreach and involve staff departmentwide and partners, especially their governing entity
- Partner with PHAB in Site Visit



## **Three Prerequisites**



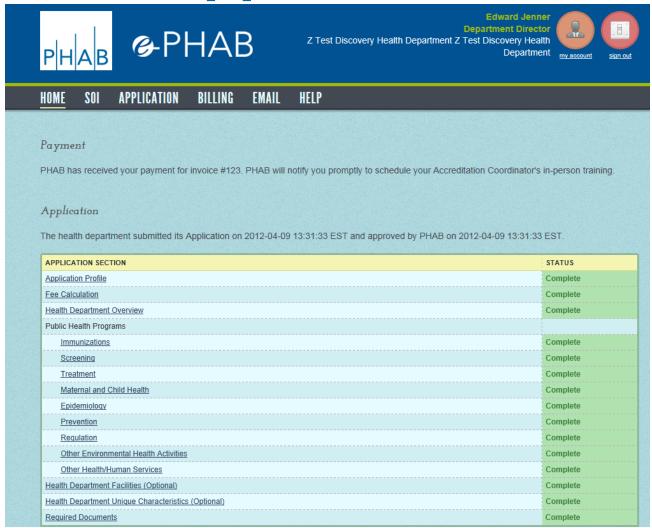
Community Health Assessment

Community Health Improvement Plan

- Health Department Strategic Plan
- Submitted with the application for accreditation
- Criteria included in Standards Domains 1 and 5



## 2. Application

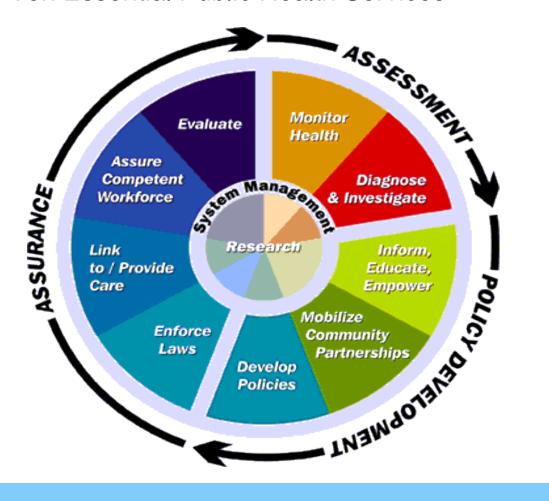






## **PHAB 12 Domains**

Based on Core Functions of Public Health & Ten Essential Public Health Services





## **Twelve Domains**

- 1. Conduct <u>assessments</u> focused on population health status and health issues facing the community
- 2. <u>Investigate</u> health problems and environmental public health hazards to protect the community
- 3. <u>Inform and educate</u> about public health issues and functions
- 4. Engage with the community to identify and solve health problems
- 5. Develop public health policies and plans
- 6. <u>Enforce</u> public health laws and regulations
- 7. Promote strategies to improve <u>access to healthcare</u> services
- 8. Maintain a competent public health workforce
- 9. Evaluate and <u>continuously improve</u> processes, programs, and interventions
- 10. Contribute to and apply the evidence base of public health
- 11. Maintain <u>administrative and management</u> capacity
- 12. Build a strong and effective relationship with governing entity



## **Structural Framework**



Domain

→ Standard

→ Measure

→ Documentation

→ Guidance



## Standard 1.1: Participate in or conduct a collaborative process resulting in a comprehensive community health assessment.

#### Measure

#### Purpose

#### Significance

#### 1.1.3 A

Ensure that the community health assessment is accessible to agencies, organizations, and the general public The purpose of this measure is to assess the Tribal, state, or local health department's efforts to share the community health assessment with other agencies and organizations and to make the assessment results available to the general public. The community health assessment is a resource for all members of the public health system and the population at large. It is a basis for collaborations in priority setting, planning, program development, funding applications, coordination of resources, and new ways to collaboratively use assets to improve the health of the population. Other governmental units and non-profits will use the community health assessment in their planning, program development, and development of funding applications.

#### Required Documentation

#### Guidance

- Documentation that the community health assessment has been distributed to partner organizations
- Documentation that the community health assessment and/or its findings have been made available to the population of the jurisdiction served by the health department
- Health departments must provide two examples of how the community health assessment is distributed to partners, stakeholders, other agencies, entities, and organizations. Samples of emails to partners and stakeholders providing information of how to access the assessment could be provided.
- 2. Health departments must provide two examples of how they communicated the community health assessment results to the public. Documentation of distribution to libraries could provide evidence, as could the publication of the community health assessment on the department's websites. Summaries of the findings could also be published in newspapers.



# **Principles of Standards and Measures**

- Advance the <u>collective public health practice</u>
- Moderate level: not minimum, not maximum
- > Be <u>clear</u>, reduce redundancy, minimize burden
- Build <u>quality improvement</u> into standards
- Apply to <u>all sizes</u> of HDs and <u>all forms</u> of governance structure
- Establish <u>same standards</u> for Tribal, state, and local health departments (different measures)
- Be reflective of emerging public health issues and opportunities
- Promote effective internal and external collaborative partnerships



## PHAB Accreditation Standards and Measures Themes



- Quality Improvement
- Planning
- Partnerships
- Community Engagement
- Leadership and Governance
- Customer Focus
- Workforce Development



## Version 1.5 (07/01/14)

- Edits and rewording for increased clarity
- Recommendations from the PH Community
- Questions Received from HDs and SVs
- Think Tanks and Expert Panels
  - Health Equity
  - Public Health Ethics
  - Public Health Communication Science
  - Public Health Workforce
  - Public Health Informatics
- Other Resources Meetings and readings



## **Accreditation Decision**

## **Accreditation Committee**



- 11 Members
  - Appointed by the PHAB Board of Directors
  - 6 PHAB Board Members and 5 non-Board Members
  - Tribal, state, or local health department experience
  - Two year staggered terms
- Meet at least quarterly
- Conflicts of Interests declared and managed
- All discussions confidential



## **Decision Criteria**



## Based on Site Visit Report entire contents:

- Assessments of Conformity with Measures
  - No numerical formula
  - No weighted measures
  - No thresholds or cut off
  - Use as a guide or indicator
- Narratives
  - Conformity comments
  - OFI and Areas of Excellence
  - Three overarching questions
    - 3 Greatest Strengths
    - 3 Biggest Challenges
    - Overall Impressions



## **Action Plan**

- Accreditation Committee identifies required areas of improvement
- Health department submits Action Plan (90 days)
- Accreditation Committee reviews Action Plan and approves (or not)
- Health Department implements plan (up to 1 year)
- Submits Action Plan Report
- Accreditation Committee determines accreditation status
  - Accredited or
  - Not Accredited



## **ANNUAL REPORTS**

"The submission of <u>annual reports is required of all accredited health departments</u>, in an on-line format provided by PHAB. Reports must:

- Include a statement that the health department <u>continues to be in</u> <u>conformity</u> with all the standards and measures of the version under which accreditation was received.
- Include leadership changes and other <u>changes that may affect the health</u> <u>department's ability to be in conformity</u> with the standards and measures.
- Describe how the health department has <u>addressed areas of improvement</u> noted in the site visit report.
- Describe how the health department will <u>continue to address areas of improvement</u> identified in the site visit report and/or by the health department in their accreditation action plan.
- Describe work on emerging public health issues and innovations



## Accreditation and Quality Improvement



## Quality Improvement Defined for Public Health

A continuous and ongoing effort to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes and other indicators of quality of services or processes that achieve equity and improve the health of the community.

Riley, Moran, Corso, Beitsch, Bialek, Cofsky. "Defining Quality Improvement in Public Health". Journal of Public Health Management and Practice, January/February 2010

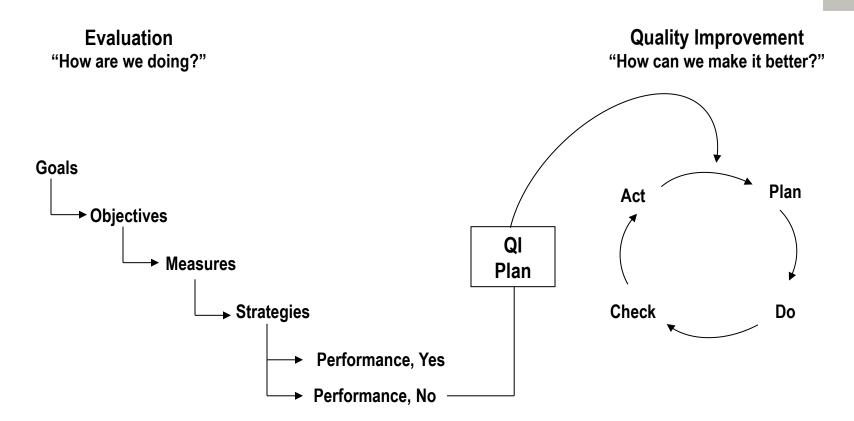




- Set focus on a vital few priorities
- Create a sense of urgency for measurable results and a culture of quality
- Engage every employee
- Build QI time into daily workload
- Adopt fact-based decision making
- Reward and celebrate progress
- Contribute to the evidence base for public health
- Document progress along a QI continuum

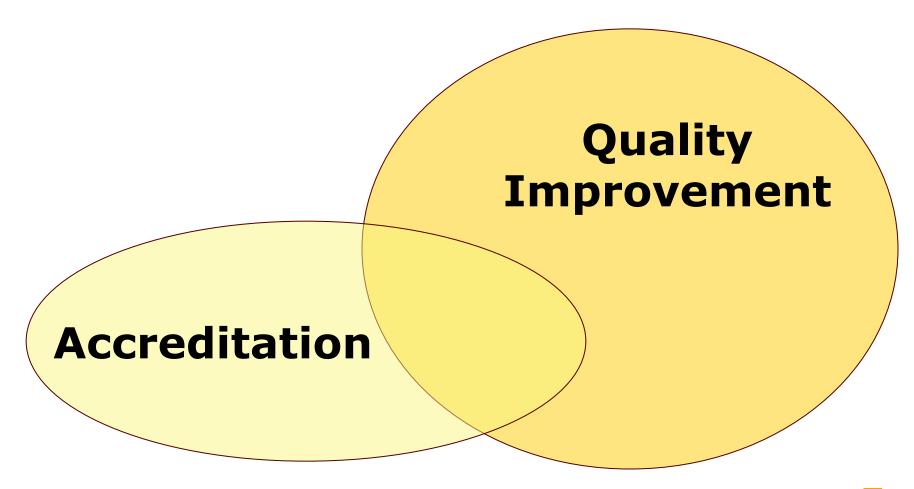


## Evaluation / QI System





# The Relationship Between Accreditation & Quality Improvement: Maximizing Overlap





## Questions





# Public Health Accreditation Board

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